



Missouri Ethics Commission
COMMITTEE DISCLOSURE REPORT COVER PAGE

M.E.C. ID NO. C041446

| | |
|-----------------------------------|-----------------|
| 1. DATE OF REPORT 8/3/2006 | OFFICE USE ONLY |
|-----------------------------------|-----------------|

INSTRUCTIONS ON REVERSE SIDE

| | |
|---|---|
| 2. FULL NAME OF COMMITTEE ALL CHILDREN MATTER-MO STATE PAC | |
| 3. COMMITTEE MAILING ADDRESS C/O THOMAS J GREVER 2345 GRAND BLVD SUITE 2800 CITY / STATE / ZIP KANSAS CITY MO 64108 | 4. COMMITTEE TELEPHONE NUMBER 816-460-5705 |
| 5. TREASURER'S NAME THOMAS J GREVER | |
| 6. TREASURER'S MAILING ADDRESS 2345 GRAND BLVD SUITE 2800 CITY / STATE / ZIP KANSAS CITY MO 64108 | 7. TREASURER'S TELEPHONE NUMBER HOME: 816-444-3308 WORK: 816-460-5705 |
| 8. DEPUTY TREASURER'S NAME <input checked="" type="checkbox"/> CHECK IF NO DEPUTY TREASURER | |
| 9. DEPUTY TREASURER'S MAILING ADDRESS | 10. DEPUTY TREASURER'S TELEPHONE NUMBER HOME: WORK: |
| 11. DATE OF ELECTION | 12. TYPE OF ELECTION (CHECK ONE) <input type="radio"/> PRIMARY <input type="radio"/> GENERAL <input type="radio"/> SPECIAL |
| 13. TIME PERIOD COVERED BY THIS STATEMENT FROM 8/2/2006 THROUGH 8/2/2006 | |
| 14. CANDIDATE COMMITTEES ONLY: LIST CANDIDATE'S NAME, ADDRESS, PHONE, OFFICE SOUGHT, POLITICAL SUBDIVISION AND POLITICAL PARTY None Entered None Entered <input type="checkbox"/> CHECK IF INCUMBENT <input type="checkbox"/> REPUBLICAN <input type="checkbox"/> DEMOCRAT <input type="checkbox"/> | 15. TYPE OF REPORT <input type="checkbox"/> 15 DAYS AFTER CAUCUS NOMINATION <input type="checkbox"/> COMMITTEE QUARTERLY REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Apr 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> Oct 15 <input type="checkbox"/> 8 DAYS BEFORE <input type="checkbox"/> 30 DAYS AFTER ELECTION <input type="checkbox"/> TERMINATION (ATTACH FORM CO-3) <input type="checkbox"/> SEMIANNUAL DEBT REPORT <input type="checkbox"/> Jan 15 <input type="checkbox"/> Jul 15 <input type="checkbox"/> ANNUAL SUPPLEMENTAL, JAN 15 <input type="checkbox"/> 15 DAYS AFTER PETITION DEADLINE <input checked="" type="checkbox"/> OTHER 48 HOUR - EXPENDITURE REPORT <input type="checkbox"/> AMENDING PREVIOUS REPORT DATED _____, 20____ |
| 16. COMMITTEE TREASURER'S SIGNATURE I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Aug 3 2006 8:44PM TREASURER'S SIGNATURE | 17. CANDIDATE'S SIGNATURE (CANDIDATE COMMITTEES ONLY) I CERTIFY THAT THIS REPORT, COMPRISED OF THIS COVER PAGE AND ALL ATTACHED FORMS, IS COMPLETE, TRUE AND ACCURATE. ELECTRONICALLY FILED Aug 3 2006 8:44PM CANDIDATE'S SIGNATURE |



Missouri Ethics Commission
REPORT SUMMARY
 INSTRUCTIONS ON REVERSE SIDE

| | | |
|-------------------------------------|----------------|-----------------|
| NAME OF COMMITTEE | DATE OF REPORT | OFFICE USE ONLY |
| ALL CHILDREN MATTER-MO STATE PAC | 8/3/2006 | |

| RECEIPTS | A. THIS PERIOD | B. THIS ELECTION | STATEMENT OF BEGINNING AND ENDING FINANCIAL CONDITION | |
|--|----------------|------------------|---|----------------|
| 1. TOTAL RECEIPTS FOR THIS ELECTION PREVIOUSLY REPORTED | | \$ 184,494.50 | | |
| 2. ALL MONETARY CONTRIBUTIONS RECEIVED THIS PERIOD | \$ 0.00 | | MONEY ON HAND | |
| 3. ALL LOANS RECEIVED THIS PERIOD | + \$ 0.00 | | | |
| 4. MISCELLANEOUS RECEIPTS THIS PERIOD | + \$ 0.00 | | | |
| 5. SUBTOTAL MONETARY RECEIPTS THIS PERIOD (SUM 2A + 3A + 4A) | \$ 0.00 | | | |
| 6. IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD | + \$ 0.00 | | 25. MONEY ON HAND AT THE BEGINNING OF THIS REPORTING PERIOD (INCLUDING FUNDS IN DEPOSITORY, CASH, SAVINGS ACCOUNTS AND ALL OTHER INVESTMENTS) | \$ 71,679.98 |
| 7. TOTAL ALL RECEIPTS THIS PERIOD (SUM 5A + 6A) | \$ 0.00 | | 26. MONETARY RECEIPTS THIS PERIOD (FROM ITEM 5) | + \$ 0.00 |
| 8. FUNDS USED FOR REPAYING LOANS THIS PERIOD | - \$ 0.00 | | 27. MONETARY DISBURSEMENTS MADE THIS PERIOD (SUM 11 + 17 + 24) | - \$ 35,587.30 |
| 9. TOTAL ALL RECEIPTS THIS ELECTION (SUM 1B + 7A - 8A) | | \$ 184,494.50 | a) Disbursements By Check \$ 35,587.30 b) Disbursements By Cash \$ 0.00 | |
| EXPENDITURES | A. THIS PERIOD | B. THIS ELECTION | 28. MONEY ON HAND AT THE CLOSE OF THIS REPORTING PERIOD (SUM 25 + 26 - 27) | \$ 36,092.68 |
| 10. TOTAL EXPENDITURES FOR THIS ELECTION PREVIOUSLY REPORTED | | \$ 100,637.58 | INDEBTEDNESS | |
| 11. EXPENDITURES MADE BY CASH OR CHECK THIS PERIOD | \$ 35,587.30 | | | |
| 12. IN-KIND EXPENDITURES MADE THIS PERIOD | + \$ 0.00 | | | |
| 13. DEBTS INCURRED THIS PERIOD (NOT INCLUDING LOANS) | + \$ 0.00 | | | |
| 14. TOTAL ALL EXPENDITURES MADE THIS PERIOD (SUM 11A + 12A + 13A) | \$ 35,587.30 | | 29. OUTSTANDING INDEBTEDNESS AT THE BEGINNING OF THIS PERIOD | \$ 0.00 |
| 15. TOTAL EXPENDITURES THIS ELECTION (SUM 10B + 14A) | | \$ 136,224.88 | 30. LOANS RECEIVED THIS PERIOD | + \$ 0.00 |
| CONTRIBUTIONS MADE | A. THIS PERIOD | B. THIS ELECTION | 31. NEW DEBTS INCURRED THIS PERIOD | + \$ 0.00 |
| 16. TOTAL CONTRIBUTIONS MADE FOR THIS ELECTION PREVIOUSLY REPORTED | | \$ 15,800.00 | 32. PAYMENTS MADE ON LOANS THIS PERIOD | - \$ 0.00 |
| 17. ALL MONETARY CONTRIBUTIONS MADE THIS PERIOD | \$ 0.00 | | 33. CREDITS RECEIVED ON LOANS THIS PERIOD | - \$ 0.00 |
| 18. ALL IN-KIND CONTRIBUTIONS MADE THIS PERIOD | + \$ 0.00 | | 34. PAYMENTS MADE THIS PERIOD ON DEBTS INCURRED IN PREVIOUS PERIOD | - \$ 0.00 |
| 19. TOTAL ALL CONTRIBUTIONS MADE THIS PERIOD (SUM 17A + 18A) | \$ 0.00 | | 35. TOTAL INDEBTEDNESS AT THE CLOSE OF THIS REPORTING PERIOD (SUM 29 + 30 + 31 - 32 - 33 - 34) | \$ 0.00 |
| 20. TOTAL ALL CONTRIBUTIONS MADE THIS ELECTION (SUM 16B + 19A) | | \$ 15,800.00 | | |
| OTHER DISBURSEMENTS | A. THIS PERIOD | B. THIS ELECTION | | |
| 21. FUNDS USED FOR REPAYING LOANS THIS PERIOD | + \$ 0.00 | | | |
| 22. PAYMENTS THIS PERIOD ON PREVIOUSLY REPORTED DEBTS INCURRED | + \$ 0.00 | | | |
| 23. ANY MISCELLANEOUS DISBURSEMENT NOT REPORTED ELSEWHERE | + \$ 0.00 | | | |
| 24. TOTAL OTHER DISBURSEMENTS THIS PERIOD (SUM 21A + 22A + 23A) | \$ 0.00 | | | |



MISSOURI ETHICS COMMISSION
CONTRIBUTIONS AND LOANS RECEIVED
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

| | | | |
|--|--|---|---|
| 1. NAME OF COMMITTEE ALL CHILDREN MATTER-MO STATE PAC | | 2. REPORT DATE 8/3/2006 | |
| A. ITEMIZED CONTRIBUTIONS RECEIVED FROM COMMITTEES REGARDLESS OF THE AMOUNT, OR FROM PERSONS GIVING MORE THAN \$100 TO A COMMITTEE. | | 4. DATE RECEIVED ----- AGGREGATE TO DATE | 5. AMOUNT RECEIVED (CHECK IF MONETARY OR IN-KIND) |
| 3. NAME, ADDRESS AND OCCUPATION (LIST COMMITTEES FIRST) | | | |
| NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE: | | \$ | <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND |
| NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE: | | \$ | <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND |
| NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE: | | \$ | <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND |
| NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE: | | \$ | <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND |
| NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE: | | \$ | <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND |
| NAME: ADDRESS: CITY / STATE: EMPLOYER: <input type="checkbox"/> COMMITTEE: | | \$ | <input type="checkbox"/> MONETARY <input type="checkbox"/> IN-KIND |
| 6. SUBTOTAL: ITEMIZED CONTRIBUTIONS THIS PAGE (SUM COLUMN 5) | | \$ | 0.00 |
| 7. SUBTOTAL: ITEMIZED CONTRIBUTIONS ANY ATTACHED PAGES | | + | \$ 0.00 |
| 8. TOTAL: ITEMIZED CONTRIBUTIONS THIS PERIOD (SUM 6 + 7) | | \$ | 0.00 |
| 9. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS MONETARY CONTRIBUTIONS | | \$ | 0.00 |
| 10. AMOUNT OF ITEM 8 THAT WAS RECEIVED AS IN-KIND CONTRIBUTIONS | | \$ | 0.00 |
| B. NON-ITEMIZED CONTRIBUTIONS RECEIVED (LIST BY CATEGORY, NOT BY INDIVIDUAL CONTRIBUTIONS) | | AMOUNT RECEIVED | |
| 11. TOTAL CONTRIBUTIONS RECEIVED AT FUND-RAISERS AS REPORTED INLINE 8 ON FORM CD1A | | \$ | 0.00 |
| 12. TOTAL ANONYMOUS CONTRIBUTIONS RECEIVED FROM PERSON GIVING \$25 OR LESS | | \$ | 0.00 |
| 13. TOTAL MONETARY CONTRIBUTIONS RECEIVED FROM PERSONS GIVING \$100 OR LESS | | \$ | 0.00 |
| 14. TOTAL IN-KIND CONTRIBUTIONS RECEIVED FROM PERSONS (NOT COMMITTEES) GIVING \$100 OR LESS | | \$ | 0.00 |
| C. LOANS RECEIVED | | 16. DATE RECEIVED | 17. AMOUNT OF LOAN (IF MORE THAN \$100 ATTACH CD-1B) |
| 15. NAME AND ADDRESS OF LENDER | | | |
| NAME: ADDRESS: CITY / STATE: | | | \$ |
| NAME: ADDRESS: CITY / STATE: | | | \$ |
| 18. SUBTOTAL: LOANS THIS PAGE (SUM COLUMN 17) | | \$ | 0.00 |
| 19. SUBTOTAL: LOANS FROM ANY ATTACHED PAGES | | \$ | 0.00 |
| 20. TOTAL: LOANS THIS PERIOD (SUM 18 + 19) | | \$ | 0.00 |
| 21. TOTAL: ALL IN-KIND CONTRIBUTIONS (SUM 10 + 14) | | \$ | 0.00 |
| 22. TOTAL: ALL MONETARY CONTRIBUTIONS (SUM 9, 11, 12 & 13) | | \$ | 0.00 |
| 23. MONETARY CONTRIBUTIONS & LOANS RECEIVED REQUIRING A RECORD OF NAME & ADDRESS (SUM 9, 13 & 20) | | \$ | 0.00 |



MISSOURI ETHICS COMMISSION
EXPENDITURES AND CONTRIBUTIONS MADE
 INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

| | | | |
|--|--|----------------------------|---|
| 1. NAME OF COMMITTEE ALL CHILDREN MATTER-MO STATE PAC | | 2. REPORT DATE 8/3/2006 | |
| A. EXPENDITURES OF \$100 OR LESS BY CATEGORY (LIST PAYMENTS TO CAMPAIGN WORKERS IN SECTION B BELOW) | | | 4. AMOUNT PAID OR INCURRED THIS PERIOD |
| 3. CATEGORY OF EXPENDITURE | | | |
| | | | \$ |
| | | | \$ |
| 5. SUBTOTAL: NON-ITEMIZED EXPENDITURES THIS PAGE (SUM COLUMN 4) | | | \$ 0.00 |
| 6. SUBTOTAL: NON-ITEMIZED EXPENDITURES ANY ATTACHED PAGES | | | + \$ 0.00 |
| 7. TOTAL: NON-ITEMIZED EXPENDITURES THIS PERIOD (SUM 5 + 6) | | | \$ 0.00 |
| B. ITEMIZED EXPENDITURES ALL OVER \$100 AND ALL PAYMENTS TO CAMPAIGN WORKERS | | 9. DATE | 10. PURPOSE - (IF PAYMENT WAS TO A CAMPAIGN WORKER, SHOW AGGREGATE PAID) |
| 8. NAME AND ADDRESS OF RECIPIENT | | | 11. AMOUNT THIS PERIOD |
| NAME: Campaign & Issue Management | | 8/2/2006 | Direct Mail-Dir \$ 0.00 <input checked="" type="checkbox"/> PAID 18,699.32 <input type="checkbox"/> INCURRED |
| ADDRESS: 292 San Diego Rd. | | | |
| CITY/STATE: Carbondale, IL 62901 | | | |
| NAME: Inkosi Design Studio | | 8/2/2006 | Direct Mail-Dir \$ 0.00 <input checked="" type="checkbox"/> PAID 3,350.00 <input type="checkbox"/> INCURRED |
| ADDRESS: 5261 Delmar Blvd., #205 | | | |
| CITY/STATE: St. Louis, MO 63108 | | | |
| NAME: Jamestown Assoc. | | 8/2/2006 | Direct Mail-Dir \$ 0.00 <input checked="" type="checkbox"/> PAID 10,222.18 <input type="checkbox"/> INCURRED |
| ADDRESS: 5 Mapleto Rd., #300 | | | |
| CITY/STATE: Princeton, NJ 08540 | | | |
| NAME: Advantage, Inc. | | 8/2/2006 | Telemarketing-D \$ 0.00 <input checked="" type="checkbox"/> PAID 3,315.80 <input type="checkbox"/> INCURRED |
| ADDRESS: 1611 N. Kent St., #905 | | | |
| CITY/STATE: Arlington, VA 22209 | | | |
| NAME: | | | \$ <input type="checkbox"/> PAID <input type="checkbox"/> INCURRED |
| ADDRESS: | | | |
| CITY/STATE: | | | |
| 12. SUBTOTAL: THIS PAGE (SUM COLUMN 11) | | | \$ 35,587.30 |
| 13. SUBTOTAL: ANY ATTACHED PAGES | | | + \$ 0.00 |
| 14. TOTAL: ITEMIZED EXPENDITURES THIS PERIOD (SUM 12 +13) | | | \$ 35,587.30 |
| 15. TOTAL: MONETARY EXPENDITURES THIS PERIOD (SUM 7 + 14) | | | \$ 35,587.30 |
| 16. AMOUNT OF LINE 15 WHICH WAS PAID OUT THIS PERIOD | | | \$ 35,587.30 |
| 17. AMOUNT OF LINE 15 WHICH WAS DEBT INCURRED THIS PERIOD | | | \$ 0.00 |
| 18. IF COMMITTEE MADE ANY IN-KIND EXPENDITURES THIS PERIOD, LIST AMOUNT | | | \$ 0.00 |
| 19. FUNDS USED FOR REPAYING LOANS THIS PERIOD (ATTACH FORM CD1B) | | | \$ 0.00 |
| C. MONETARY CONTRIBUTIONS MADE (REGARDLESS OF AMOUNT) | | 21. DATE | 22. AMOUNT |
| 20. NAME AND ADDRESS OF CANDIDATE OR COMMITTEE | | | |
| NAME: | | | |
| ADDRESS: | | | |
| CITY/STATE: | | | \$ |
| NAME: | | | |
| ADDRESS: | | | |
| CITY/STATE: | | | \$ |
| NAME: | | | |
| ADDRESS: | | | |
| CITY/STATE: | | | \$ |
| 23. SUBTOTAL: THIS PAGE (SUM COLUMN 22) | | | \$ 0.00 |
| 24. SUBTOTAL: ANY ATTACHED PAGES | | | + \$ 0.00 |
| 25. TOTAL: MONETARY CONTRIBUTIONS MADE THIS PERIOD (SUM 23 + 24) | | | \$ 0.00 |
| 26. IF COMMITTEE MADE ANY LOANS THIS PERIOD, LIST AMOUNT | | | \$ 0.00 |
| 27. TOTAL: ALL MONETARY CONTRIBUTIONS AND LOANS MADE THIS PERIOD (SUM 25 + 26) | | | \$ 0.00 |
| 28. IF COMMITTEE MADE ANY IN-KIND CONTRIBUTIONS THIS PERIOD, LIST AMOUNT | | | \$ 0.00 |



MISSOURI ETHICS COMMISSION
DIRECT EXPENDITURE REPORT

INSTRUCTIONS ON REVERSE SIDE

OFFICE USE ONLY

| | |
|--|----------------------------|
| 1. NAME OF COMMITTEE ALL CHILDREN MATTER-MO STATE PAC | 2. REPORT DATE 8/3/2006 |
|--|----------------------------|

DIRECT EXPENDITURE REPORT

This form is used when expenditures listed on form CD3 have been made directly on behalf of a candidate or ballot measure issue. Candidate committees making expenditures only on behalf of the candidate for which their committee was formed do not complete this form.

A. CANDIDATES

| 3. CANDIDATE'S NAME AND ADDRESS | 4. OFFICE SOUGHT | 5. CHECK ONE SUPP. OPP. | 6. EXPENDITURES THIS PERIOD | 7. EXPENDITURES TO DATE |
|---|------------------|-------------------------------|--------------------------------|----------------------------|
| NAME: ADDRESS: CITY STATE ZIP: | | | \$ | \$ |
| NAME: View Attached Form(s) ADDRESS: CITY STATE ZIP: | | | \$ | \$ |
| NAME: ADDRESS: CITY STATE ZIP: | | | \$ | \$ |
| NAME: ADDRESS: CITY STATE ZIP: | | | \$ | \$ |

B. BALLOT MEASURES

| 8. NAME OF BALLOT MEASURE (INCLUDE POLITICAL SUBDIVISION) | 9. ELECTION DATE | 10. CHECK ONE SUPP. OPP. | 11. EXPENDITURES THIS PERIOD | 12. EXPENDITURES TO DATE |
|--|---------------------|--------------------------------|------------------------------------|-----------------------------|
| BALLOT MEASURE: POLITICAL SUBDIVISION: | | | \$ | \$ |
| BALLOT MEASURE: POLITICAL SUBDIVISION: | | | \$ | \$ |
| BALLOT MEASURE: POLITICAL SUBDIVISION: | | | \$ | \$ |



MISSOURI ETHICS COMMISSION DIRECT EXPENDITURE REPORT

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| 1. NAME OF COMMITTEE ALL CHILDREN MATTER-MO STATE PAC | 2. REPORT DATE 8/3/2006 |
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DIRECT EXPENDITURE REPORT

This form is used when expenditures listed on form CD3 have been made directly on behalf of a candidate or ballot measure issue. Candidate committees making expenditures only on behalf of the candidate for which their committee was formed do not complete this form.

A. CANDIDATES

| 3. CANDIDATE'S NAME AND ADDRESS | 4. OFFICE SOUGHT | 5. CHECK ONE SUPP. OPP. | 6. EXPENDITURES THIS PERIOD | 7. EXPENDITURES TO DATE |
|--|---------------------------------|-------------------------------|--------------------------------|----------------------------|
| NAME: Derio Gambaro ADDRESS: 5320 Wilson Ave. St. Louis, MO 63110 CITY STATE ZIP: | State Senate Dist 4 | ✓ | \$ 9,349.66 | \$ 9,349.66 |
| NAME: Mike Flaherty ADDRESS: 6837 Oak Terrace Kansas City, MO 64113 CITY STATE ZIP: | State Senate Dist 10 | ✓ | \$ 9,349.66 | \$ 9,349.66 |
| NAME: Rodney Hubbard ADDRESS: 2845 Olive St.# 306 St. Louis, MO 63103 CITY STATE ZIP: | State House Dist 53 | ✓ | \$ 3,350.00 | \$ 31,640.00 |
| NAME: John DeStefano ADDRESS: 8636 N. Oregon Ave. Kansas City, MO 64154 CITY STATE ZIP: | State House Dist 32 | ✓ | \$ 10,222.18 | \$ 10,222.18 |
| NAME: Matt Bartle ADDRESS: 10817 Wildflower Dr. py Lee s Summit CITY STATE ZIP: | State Senate Dist 8 64086 | ✓ | \$ 3,315.80 | \$ 3,315.80 |
| NAME: ADDRESS: CITY STATE ZIP: | | | \$ | \$ |
| NAME: ADDRESS: CITY STATE ZIP: | | | \$ | \$ |
| NAME: ADDRESS: CITY STATE ZIP: | | | \$ | \$ |